



To: Prospective Applicants for an Industrial Wastewater Discharge Permit

Attached is an **Industrial Wastewater Discharge Permit Application, SCC-2**, for a Louisiana Pollutant Discharge Elimination System (LPDES) permit, authorized under EPA's delegated NPDES program under the Clean Water Act. To be considered complete, every item on the form must be addressed and the last page signed by an authorized company agent. If an item does not apply, please enter "NA" (for not applicable) to show that the question was considered.

Your **completed application**, with a marked **U.S.G.S. Quadrangle map** or equivalent attached, should be submitted to:

Department of Environmental Quality
Office of Environmental Services
Post Office Box 4313
Baton Rouge, LA 70821-4313
Attention: Water & Waste Permits Division

Please be advised that completion of this application may not fulfill all state, federal, or local requirements for facilities of this size and type.

According to L. R. S. 48:385, any discharge to a state highway ditch, cross ditch, or right-of-way shall require approval from:

Louisiana DOTD
Office of Highways
Post Office Box 94245
Baton Rouge, LA 70804-9245
(225) 379-1301

AND

Louisiana DHH
Office of Public Health
6867 Bluebonnet Road, Box 7
Baton Rouge, LA 70810
(225) 765-5044

In addition, the plans and specifications for sanitary treatment plants must be approved by the Louisiana DHH, Office of Public Health at the address above.

A copy of the LPDES regulations may be obtained from the Department's website at <http://www.deq.state.la.us/planning/regs/index.htm> or by contacting the Office of Environmental Assessment, Regulations Development Section, Post Office Box 4314, Baton Rouge, Louisiana 70821-4314, phone (225) 219-3550.

If you have any questions, please contact DEQ at (225) 219-3181.

Date _____
Agency Interest No. AI _____
LWDPS Permit No. WP _____
NPDES/LPDES Permit No. LA _____

Please check: ☐ Initial Permit
☐ Permit Modification
☐ Permit Renewal
☐ Existing Facility

STATE OF LOUISIANA
DEPARTMENT OF ENVIRONMENTAL QUALITY
Office of Environmental Services, Water & Waste Permits Division
Post Office Box 4313
Baton Rouge, La 70821-4313
PHONE#: (225) 219-3181

**LPDES PERMIT APPLICATION TO DISCHARGE
WASTEWATER FROM INDUSTRIAL FACILITIES**
(Attach additional pages if needed.)

Application to the Department of Environmental Quality (DEQ) may be additionally be submitted on the following:

1. Appropriate EPA National Pollutant Discharge Elimination System (NPDES) Application:
Form 1 and one of the following appropriate forms: Form 2B, Form 2C, Form 2D, Form 2E, or Form 2F
plus
Section VII (if appropriate) & 1701 SECTION of this form (SCC-2)

SECTION I - FACILITY INFORMATION

- A. Permit is to be issued to the following:** (must have operational control over the facility operations - see LAC 33:IX.2501.B and LAC 33:IX.2503.A and B).

1. Legal Name of Applicant/Owner
(Company, Partnership, Corporation, etc.) _____

Facility Name _____

Mailing Address _____

_____ Zip Code: _____

If applicant named above is not also the owner, state owner name, phone # and address.

Please check status: ☐ Federal ☐ Parish ☐ Municipal
☐ State ☐ Public ☐ Private ☐ Other: _____

2. Location of facility. Please provide a specific street, road, highway, interstate, and/or River Mile/Bank location of the facility for which the application is being submitted.

City _____ Parish _____

Front Gate Coordinates:

Latitude- _____ deg. _____ min. _____ sec. Longitude- _____ deg. _____ min. _____ sec.

Method of Coordinate Determination: _____

(Quad Map, Previous Permit, website, GPS)

Is the facility located on Indian Lands? ☐ Yes ☐ No

SECTION I - FACILITY INFORMATION (cont.)

3. Name & Title of Contact Person at Facility _____
Phone _____ Fax _____ e-mail _____
Facility Federal Tax I.D. _____
nine-digit number
SIC (Standard Industrial Classification) Code(s): _____
SIC codes can be obtained from the U. S. Department of Labor internet site at <http://www.osha.gov/oshstats/sicser.html>

B. Name and address of responsible representative who completed the application:

Name & Title _____
Company _____
Phone _____ Fax _____ e-mail _____
Address _____

C. Facility Information.

1. Facility Type _____ (cannery, oil refinery, dairy, etc.)
If concentrated animal feeding operation or aquatic animal production facility, complete EPA Form 2B.
2. Water Discharge Permit Revision (if applicable): Describe the requested revision to the existing permit.

3. Source of water supply in gallons per day. List each source giving quality such as fresh, brackish, salt, hard, or soft; and give breakdown as to how each source is used.

SECTION I - FACILITY INFORMATION (cont.)

D. Facility Operations.

1. Processes used which produce industrial wastes discharged into waters of the State. Please explain the operations in your facility in a comprehensive fashion. Include a description of the composition of any cooling water additives. If you are a producer of a product, what steps are taken to produce that product, especially those that generate a waste stream? If you are provider of a service, be specific (give quantitative values where possible, i.e. a physical measure of the amount of business you do in an average day, week, or month) about what the service is, how it is provided, and how it generates wastewater. Attach extra sheets if space below is insufficient. If appropriate, make processes coincide with sources identified in Section II.

2. Products/Services

3. Raw Materials

4. Guideline/Production. If an effluent guideline applies to the applicant and is expressed in terms of production (or other measure of operation), a reasonable measure of the applicant's actual production for each product reported in pounds per year, or other applicable units, is necessary. A reasonable measure of actual production may be either the maximum 30-day average production of the previous year, or the monthly average for the highest of the previous five years. For new sources or new discharges, actual production may be estimated using projected production for the first two years.

Guideline (Citation)	Production	Unit
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>
<hr/>	<hr/>	<hr/>

5. Zebra Mussels. Describe any treatment employed or planned at the facility to eliminate/combat zebra mussel incursion.

6. List any solid or liquid waste disposal methods and facilities. Include a description of the ultimate disposal of any solid or liquid wastes that are disposed of other than by discharge.

SECTION I - FACILITY INFORMATION (cont.)

E. Facility History

1. Anticipated date or original date of startup or change in operations.

2. When did, or will, present operations start?

3. If applicable, what previous operations were located at the site and what was the name of the facility?

4. If this is new construction, describe the site property prior to construction. For example, was it undisturbed or was there a previous structure on the site? What was the size of the site?

5. If this is new construction, what date did or will the facility be completed? _____
6. Is this facility located in a designated industrial area? ___Yes ___No
7. Has this facility experienced a reportable quantity spill in the last 10 years? If yes, please explain.

SECTION II – DISCHARGE INFORMATION

A. Miscellaneous Discharges

Are there any discharges to the waters of the state such as sanitary wastewaters, hydrostatic wastewaters, once-through non-contact cooling water, washdown water, etc? How are these waters discharged? Describe any treatment associated with each.

SECTION II - DISCHARGE INFORMATION (cont.)

A. Storm water: Complete the following for all storm water discharges. (Make additional copies if necessary.)

1. Are storm water discharges covered by either the Baseline or Multi-Sector Storm Water General Permit?

_____ Yes _____ No If yes, provide the permit number: _____

Discharge Identification (ex. Storm water Outfall 001): _____

1. Acreage. For all outfalls that convey storm water only or that include storm water combined with other waste streams, give the area drained by the outfall in acreage, extent of impervious surfaces (paved areas, rooftops), and describe the activities that occur in that area.

2. List all chemicals and petroleum products stored outside and provide a description of the containment area.

3. Describe all significant materials that are currently or have in the past three years been treated, stored, or disposed of in a manner to allow exposure to storm water. List the method of treatment, storage, or disposal; past and present materials management practices employed to minimize contact by these materials with storm water runoff; materials loading and access areas; and the location, manner, and frequency in which pesticides, herbicides, soil conditioners, and fertilizers are applied.

4. Provide information regarding the history of significant leaks or spills of toxic or hazardous pollutants at the facility in the last three years, including the approximate date and location of the spill or leak and the type and amount of material released.

5. Describe the evaluation method(s) for determining the presence of non-storm water discharges in storm water outfalls named in this NOI. For any storm water outfall covered by this NOI, the signature on page 11 constitutes certification that the outfalls have been tested or evaluated for the presence of non-stormwater discharges, and that all non-stormwater discharges from these outfall(s) are identified in this NOI. Refer to LAC 33:IX.2511.C.1.a.iii.

SECTION II - DISCHARGE INFORMATION (cont.)

C. Outfall Identification.

Provide a description of all operations contributing wastewater to the effluent for the outfall including process wastewater, sanitary wastewater, cooling water, stormwater runoff, and washdown water, etc. and the average flow contributed by each operation.

Outfall Number	Operation Contributing Flow	Treatment Description	Average Flow (include units)

SECTION II - DISCHARGE INFORMATION (cont.)

- D. Complete this section for each discharge outfall.** Outfalls are discharge points. An external outfall is a discrete discharge point beyond which the waste stream receives no further mixing with other waste streams prior to discharging into a receiving waterbody. An internal outfall is an outfall for a waste stream that combines with other waste stream(s) before discharging into an "external" outfall. Please provide your after-treatment test results in the units asked for on the application. For proposed facilities, estimates should be provided for any expected contaminants even though the facility is not in place yet. Make additional copies for each outfall.

1. Outfall No. _____

2. Outfall Location. Provide a description of the physical location for each outfall.

3. Latitude/Longitude of Discharge:

Latitude- ____ deg. ____ min. ____ sec. Longitude- ____ deg. ____ min. ____ sec.

Method of Coordinate Determination: _____
(Quad Map, Previous Permit, website, GPS)

4. If a new discharge, when do you expect to begin discharging? _____
5. Indicate how the wastewater reaches state waters (named water bodies). This will usually be either *directly*, by *open ditch* (if it is a highway ditch, indicate the highway), or by *pipe*. Please specifically name all of the minor water bodies that your wastewater will travel through on the way to a major water body. This information can be obtained from U.S.G.S. Quadrangle Maps. Include river mile of discharge point if available.

By _____ (effluent pipe, ditch, etc.);

thence into _____ (parish drainage ditch, canal, etc.);

thence into _____ (named bayou, creek, stream, etc.);

thence into _____ (lake, river, etc.).

6. Except storm water, if any of the applicant's discharges are intermittent or seasonal, please complete the following table.

Frequency of Flow (average)			Flow Rate (mgd)	
Number of Mo/Year	Number of Days/Week	Number of Hours/Day	Long Term Avg.	Daily Maximum

7. Treatment Method. Please be specific.

SECTION III – LABORATORY ANALYSIS

A. Lab Analysis. Make additional copies as necessary. Sampling and analytical protocols must conform to the requirements in LAC 33:IX.Chapters 25 and 65, and 40 CFR Part 136; when no analytical method is approved, the applicant may use any suitable method but must provide a description of the method. For storm water discharges, indicate date & duration of storm event sampled, total inches of precipitation, and number of hours since the end of the previous storm event that was greater than 0.1 inches.

Complete this section for each outfall. Complete this section for each pollutant, unless the applicant demonstrates a waiver for that pollutant is appropriate.

1. Outfall Number: _____ Description: _____

Pollutant	Effluent Analysis			
	Concentration (mg/l)		Mass (lbs/day)	
	Monthly Average	Daily Maximum	Monthly Average	Daily Maximum
BOD ₅				
COD				
TOC				
Oil and Grease				
Ammonia (as N)				
Total Nitrogen (stormwater only)				
Total Phosphorus * (stormwater only)				
Total Residual Chlorine * (if chlorine used)				
Total Suspended Solids				
Fecal Coliforms (cols/100ml) (if present)				
	Daily Maximum	Monthly Average Maximum**	Monthly Average Minimum	Method of Measure
Flow (GPD)				
Winter Temperature (EC)				
Summer Temperature (EC)				
	Minimum	Maximum		
Discharge Duration (hrs/day)				
pH (SU)				

* If believed present in stormwater.

** Within the previous two years. (The maximum monthly average value is the highest value of all the monthly averages over the previous two years. The minimum monthly average value is the lowest value of the monthly averages over the previous two years.)

SECTION III – LABORATORY ANALYSIS (cont.)

B. List pollutants and report data for any of the following pollutants that you believe will be present or are limited directly by an effluent limitation guideline or indirectly through limitations on an indicator pollutant.

1. Conventional and Non-Conventional Pollutants: Bromide, Chlorine (total residual), Color, Fecal Coliform, Fluoride, Nitrate-Nitrite, Nitrogen (total organic), Total Phosphorus, Radioactivity, Sulfate, Sulfide, Sulfite, Surfactants, and;
2. Toxic Pollutants: Asbestos, and;
3. Hazardous Substances: 2, 2-Di-chloropro-pionic acid, 2, 4,5-TP [2-(2,4,5-trichloro-phenoxy)propionic acid], 2,4,5-T (2,4, 5-trichlorophenoxy acetic acid), 2,4-D (2,4-Di-chlorophenoxy acetic acid), Acetaldehyde, Allyl alcohol, Allyl chloride, Amyl acetate, Aniline, Benzonitrile, Benzyl chloride, Butyl acetate, Butylamine, Captan, Carbaryl, Carbofuran, Carbon disulfide, Chlorpyrifos, Coumaphos, Cresol, Crotonaldehyde, Cyclohexane, Diazinon, Dicamba, Dichlobenil, Dichlone, Dichlorvos, Diethyl amine, Dimethyl amine, Dinitrobenzene, Diquat, Disulfoton, Diuron, Dodecyl-benzenesulfo-nate, Dodecylbenzene-sulfonate, Epichloro-hydrin, Ethion, Ethylene diamine, Ethylene dibromide, Formaldehyde, Furfural, Guthion, Isoprene, Isopropanola-mine, Kelthane, Kepone, Malathion, Mercapto-dimethur, Methoxychlor, Methyl mercaptan, Methyl methacrylate, Methyl parathion, Mevinphos, Mexacarbate, Monoethyl amine, Monomethyl amine, Naled, Naphthenic acid, Nitrotoluene, Parathion, Phenolsulfanate, Phosgene, Propargite, Propylene oxide, Pyrethrins, Quinoline, Resorcinol, Strontium, Strychnine, Styrene, TDE (tetrachloro-rodiphenylethane), Trichlorofon , Triethanolamine, Triethylamine, Trimethylamine, Uranium, Vanadium, Vinyl Acetate, Xylene, Xylenol, Zirconium, and;
4. Any of the pollutants listed under Section III.B as Volatile Organic Chemicals, Acid Extractable Organic Chemicals, Base/Neutral Extractable Organic Chemicals, Pesticides, Metals, and Additional Metals

<u>Pollutant</u>	<u>Daily Average (unit)</u>	<u>Daily Maximum (unit)</u>	<u>Basis of Estimate</u>

C. New Source Dischargers discharging process wastewater. Complete the following items:

1. Engineering Report. Are there any technical evaluations concerning your wastewater treatment system, including engineering reports or pilot plant studies?

2. Similar Operations. Provide the name and location of any existing plant(s) which, to the best of your knowledge, resembles this facility with respect to processes, wastewater constituents, or wastewater treatment.

SECTION III – LABORATORY ANALYSIS (cont.)

D. Industrial Category.

For certain categories of industries, each outfall for which coverage under this permit is being sought must be evaluated for the presence of particular pollutants which have in the past been associated with process wastewaters for those industries. For each outfall, if any of your processes which contribute wastewater belong to one or more of the following primary industry categories, you must report the quantitative test data for:

1. all of the toxic metals, cyanide and total phenols and,
2. the organic toxic pollutants as applicable to your category below as indicated by the ✕'s.

Circle your industrial category(ies) below. Use separate sheets for each outfall. Also include any specific products, raw materials, or waste products that are or may potentially be present in the effluent. If your gross annual sales average is less than \$100,000, please indicate if a small business exemption is requested.

Primary Industry Category	Volatile	Acid	Base/Neutra	Pesticide/PCB'
Adhesives and Sealant	✕	✕	✕	
Aluminum Forming	✕	✕	✕	
Auto and Other Laundries	✕	✕	✕	✕
Battery Manufacturing	✕		✕	
Coal Mining				
Coil Coating	✕	✕	✕	
Copper Forming	✕	✕	✕	
Electrical and Electronic Components	✕	✕	✕	✕
Electroplating	✕	✕	✕	
Explosives Manufacturing		✕	✕	
Foundries	✕	✕	✕	
Gum and Wood Chemicals				
Inorganic Chemicals Manufacturing	✕	✕	✕	
Iron and Steel Manufacturing	✕	✕	✕	
Leather Tanning and Finishing	✕	✕	✕	
Mechanical Products Manufacturing	✕	✕	✕	
Nonferrous Metals Manufacturing	✕	✕	✕	✕
Ore Mining		✕		
Organic Chemicals Manufacturing	✕	✕	✕	✕
Paint and Ink Formulation	✕	✕	✕	
Pesticides	✕	✕	✕	✕
Petroleum Refining	✕			
Pharmaceutical Preparations	✕	✕	✕	
Photographic Equipment and Supplies				
Plastics Processing	✕			
Plastic and Synthetic Materials Manufacturing	✕	✕	✕	✕
Porcelain Enameling				
Printing and Publishing	✕	✕	✕	✕
Pulp and Paper Mills				
Rubber Processing	✕	✕	✕	
Soap and Detergent Manufacturing	✕	✕	✕	
Steam Electric Power Plants	✕	✕		
Textile Mills	✕	✕	✕	
Timber Products Processing	✕	✕	✕	✕

IF NONE OF YOUR PROCESSES BELONG IN ANY OF THE ABOVE CATEGORIES, SKIP TO E. BELOW
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SECTION III – LABORATORY ANALYSIS (cont.)

Outfall Number:		Effluent			
Pollutant	MQL* (Fg/l)	Concentration (mg/l)		Mass (lbs/day)	
		Monthly Average	Daily Maximum	Monthly Average	Daily Maximum
<i>Volatile Organic Chemicals – EPA Method 624 suggested</i>					
acrolein	50				
acrylonitrile	50				
benzene	10				
bromoform	10				
carbon tetrachloride	10				
chlorobenzene	50				
chlorodibromomethane	10				
chloroethane	10				
2-chloroethylvinyl ether	50				
chloroform	10				
dichlorobromomethane	10				
1,1-dichloroethane	10				
1,2-dichloroethane	10				
1,1-dichloroethylene	10				
1,2-dichloropropane	10				
1,3-Dichloropropylene	10				
ethylbenzene	10				
methyl bromide	50				
methyl chloride	50				
methylene chloride	20				
1,1,2,2-tetrachloroethane	10				
tetrachloroethylene	10				
toluene	10				
1,2-trans-dichloroethylene	10				
1,1,1-trichloroethane	10				
1,1,2-trichloroethane	10				
trichloroethene (trichloroethylene)	10				
vinyl chloride (chloroethylene)	10				
<i>Acid Extractable Organic Chemicals – EPA Method 625 suggested</i>					

SECTION III – LABORATORY ANALYSIS (cont.)

Outfall Number:		Effluent			
Pollutant	MQL* (Fg/l)	Concentration (mg/l)		Mass (lbs/day)	
		Monthly Average	Daily Maximum	Monthly Average	Daily Maximum
2-chlorophenol	10				
3-chlorophenol	10				
4-chlorophenol	10				
2,3-dichlorophenol	10				
2,4-dichlorophenol	10				
2,5-dichlorophenol	10				
2,6-dichlorophenol	10				
3,4-dichlorophenol	10				
2,4-dimethylphenol	10				
2,4-dinitrophenol	50				
2-methyl 4,6-dinitrophenol (4,6-dinitro-o-cresol)	50				
2-nitrophenol	20				
4-nitrophenol	50				
4-chloro-3-methylphenol (p-chloro-m-cresol)	10				
pentachlorophenol	50				
phenol	10				
2,4,6-trichlorophenol	10				
<i>Base/Neutral Extractable Organic Chemicals - EPA Method 625 suggested</i>					
acenaphthene	10				
acenaphthylene	10				
anthracene	10				
benzidine	50				
benzo(a)anthracene	10				
benzo(a)pyrene	10				
3,4-benzo fluoranthene	10				
benzo(ghi)perylene	20				
benzo(k)fluoranthene	10				
bis(2-chloroethoxy)methane	10				
bis(2-chloroethyl)ether	10				
bis(2-chloroisopropyl)ether	10				
bis(2-ethylhexyl)phthalate	10				

SECTION III – LABORATORY ANALYSIS (cont.)

Outfall Number:		Effluent			
Pollutant	MQL* (Fg/l)	Concentration (mg/l)		Mass (lbs/day)	
		Monthly Average	Daily Maximum	Monthly Average	Daily Maximum
4-bromophenyl phenyl ether	10				
butylbenzyl phthalate	10				
2-chloronaphthalene	10				
4-chlorophenyl phenyl ether	10				
chrysene	10				
dibenzo(a,h)anthracene	20				
1,2-dichlorobenzene	10				
1,3-dichlorobenzene	10				
1,4-dichlorobenzene	10				
3,3'-dichlorobenzidine	50				
diethyl phthalate	10				
dimethyl phthalate	10				
di-n-butyl phthalate	10				
2,4-dinitrotoluene	10				
2,6-dinitrotoluene	10				
di-n-octyl phthalate	10				
1,2-diphenylhydrazine (as azobenzene)	20				
fluoranthene	10				
fluorene	10				
hexachlorobenzene	10				
hexachlorobutadiene	10				
hexachlorocyclopentadiene	10				
hexachloroethane	20				
indeno(1,2,3-cd)pyrene	20				
isophorone	10				
naphthalene	10				
nitrobenzene	10				
N-nitrosodimethylamine	50				
N-nitrosodi-n-propylamine	20				
N-nitrosodiphenylamine	20				
phenanthrene	10				
pyrene	10				

SECTION III – LABORATORY ANALYSIS (cont.)

Outfall Number:		Effluent			
Pollutant	MQL* (Fg/l)	Concentration (mg/l)		Mass (lbs/day)	
		Monthly Average	Daily Maximum	Monthly Average	Daily Maximum
1,2,4-trichlorobenzene	10				
<i>Pesticides & PCB's - EPA Method 608 required</i>					
aldrin	0.05				
Aroclor 1016 (PCB-1016)	1.0				
Aroclor 1221 (PCB-1221)	1.0				
Aroclor 1232 (PCB-1232)	1.0				
Aroclor 1242 (PCB-1242)	1.0				
Aroclor 1248 (PCB-1248)	1.0				
Aroclor 1254 (PCB-1254)	1.0				
Aroclor 1260 (PCB-1260)	1.0				
alpha-BHC	0.05				
beta-BHC	0.05				
delta-BHC	0.05				
gamma-BHC	0.05				
chlordane	0.2				
4,4'DDT	0.1				
4,4'DDE	0.1				
4,4'DDD	0.1				
dieldrin	0.1				
alpha-endosulfan	0.1				
beta-endosulfan	0.1				
endosulfan sulfate	0.1				
endrin	0.1				
endrin aldehyde	0.1				
heptachlor	0.05				
heptachlor epoxide	0.05				
Toxaphene	5.0				
2,4-dichlorophenocetic acid (2,4-D)	---				
2-(2,4,5-trichlorophenoxy) propionic acid	---				
2,3,7,8-tetrachlorodibenzo-p-dioxin use EPA Method 1613	10 ppq				
<i>Metals, Cyanide & Total Phenols</i>					

SECTION III – LABORATORY ANALYSIS (cont.)

Outfall Number:		Effluent			
Pollutant	MQL* (Fg/l)	Concentration (mg/l)		Mass (lbs/day)	
		Monthly Average	Daily Maximum	Monthly Average	Daily Maximum
Antimony, Total	60				
Arsenic, Total	10				
Beryllium, Total	5				
Cadmium, Total	1				
Chromium, Total	10				
Chromium, Hexavalent	10				
Copper, Total	10				
Lead, Total	5				
Mercury, Total	0.2				
Nickel, Total [Marine]	5				
Nickel, Total [Freshwater]	40				
Selenium, Total	5				
Silver, Total	2				
Thallium, Total	10				
Zinc, Total	20				
Cyanide, Total	20				
Cyanide, Free	--				
Phenols, Total	5				
<i>Additional Metals if expected to be present. - Use EPA Approved Method</i>					
Aluminum, Total					
Barium, Total					
Boron, Total					
Cobalt, Total					
Iron, Dissolved					
Magnesium, Total					
Manganese, Total					
Molybdenum					
Tin, Total					
Titanium, Total					

* Minimum Quantification Level (MQL).

SECTION III – LABORATORY ANALYSIS (cont.)

E. Laboratory Accreditation

If any of the analysis reported above were performed by a contract lab or consulting firm, provide the firm name, address, phone number and pollutants analyzed.

Laboratory procedures and analyses performed by commercial laboratories shall be conducted in accordance with the requirements set forth under LAC 33:I.Subpart 3, Chapters 49-55.

Laboratory data generated by commercial laboratories that are not accredited under LAC 33:I.Subpart 3, Chapters 47-57, will not be accepted by the department. Retesting of analysis will be required by an accredited commercial laboratory.

In the case where effluent testing was completed by an unaccredited laboratory, and where retesting is not possible (i.e. data reported on DMRs for prior month's sampling), the data generated will be considered invalid.

Regulations on the Environmental Laboratory Accreditation Program and a list of labs that have applied for accreditation are available on the department website located at:

<http://www.deq.state.la.us/laboratory/index.htm>.

Questions concerning the program may be directed to (225) 765-2405.

F. Additional Data

1. List any toxic materials that the applicant currently uses or manufactures as an intermediate, feedstock, final product, or by-product.

2. List pertinent physical and chemical properties (e.g., toxic components, taste and odor compounds, heavy metals, etc.) that may be associated with the discharge.

SECTION III – LABORATORY ANALYSIS (cont.)

4. Toxicity Data. List any bioassay tests conducted on the effluent from the facility. Provide a summary of the test results.

SECTION IV – COMPLIANCE HISTORY

Report the history of all water violations and enforcement actions for the facility, a summary of all permit excursions including effluent violations reported on the facility's Discharge Monitoring Reports (DMRs) and bypasses for the last three years. Using a brief summary, report on the current status of all administrative orders, compliance orders, notices of violation, cease and desist orders, and any other enforcement actions either already resolved within the past 3 years or currently pending. The state administrative authority may choose, at its discretion, to require a more in-depth report of violations and compliance actions for the applicant covering any law, permit, or order concerning pollution at this or any other facility owned or operated by the applicant.

SECTION V – LAC 33.I.1701 REQUIREMENTS

- A. Does the company or owner have federal or state environmental permits identical to, or of a similar nature to, the permit for which you are applying in other states? (This requirement applies to all individuals, partnerships, corporations, or other entities who own a controlling interest of 50% or more in your company, or who participate in the environmental management of the facility for an entity applying for the permit or an ownership interest in the permit.)

☐ Permits in Louisiana. List Permit Numbers: _____

☐ Permits in other states (list states): _____

☐ No other environmental permits.

- B. Do you owe any outstanding fees or final penalties to the Department? ☐ Yes ☐ No

If yes, please explain.

- C. Is your company a corporation or limited liability company? ☐ Yes ☐ No

If yes, is the corporation or LLC registered with the Secretary of State? ☐ Yes ☐ No

SECTION VI – MAPS/DIAGRAMS

- A. Site Diagram.** Attach to this application a complete site diagram of your facility demonstrating how the wastewater flows through your facility into each clearly labeled discharge point (including all treatment points). Indicate stormwater flow pattern on this diagram or provide additional diagrams if needed. Please indicate the location of the facility and the front gate or entrance to the facility on the site diagram.
- B. Topographic Map.** Attach to this application a map or a copy of a section of the map which has been highlighted to show the path of your wastewater from your facility to the first named water body. Include on the map the area extending at least one mile beyond your property boundaries. Indicate the outline of the facility, the location of each of its existing and proposed discharge structures, and any existing hazardous waste treatment storage or disposal facilities.

A U.S.G.S. 1:24,000 scale map (7.5' Quadrangle) would be appropriate for this item. Appropriate maps can be obtained from local government agencies such as DOTD or the Office of Public Works. Maps can also be obtained online at www.map.ldeq.org or www.topozone.com. Private map companies can also supply you with these maps. If you cannot locate a map through these sources you can contact the Louisiana Department of Transportation and Development at:

1201 Capitol Access Road
Baton Rouge, LA 70802
(225) 379-1107
maps@dotd.louisiana.gov

- C. Flow Diagram.** Attach a line drawing of the water flow through the facility with a water balance showing operations contributing wastewater to the effluent and treatment units. The water balance must show average and maximum flows at intake and discharge points and between units, including treatment units. If a water balance cannot be determined, the applicant may provide instead a pictorial description of the nature and amount of any sources of water and any collection and treatment measures. Hand drawn maps are acceptable.
- D. Block type water flow diagram** for the complete facility including treatment of each discharge.

SECTION VII - ENVIRONMENTAL IMPACT QUESTIONNAIRE

Those applicants that are (1) major new facilities or (2) existing major facilities applying for a substantial modification to their permit must complete this questionnaire.

There is no requirement that the information furnished in response to this questionnaire be certified by a professional engineer or other expert. However, simple “yes” or “no” answers **will not be acceptable**. A measured response should be given for each question posed, taking into consideration appropriate factors such as: the environmental sensitivity of the area, both for the proposed site and alternative sites; impacts on the economy of the area, both favorable and unfavorable; availability of raw materials, fuels and transportation and the impact of potential sites on their availability and economics; relationship of the facility to other facilities, either within or independent of the company, and the effects of location on these relationships; and other factors which may be appropriate on a case-by-case basis. **(Attach any additional pages if needed.)**

1. Have the potential and real adverse environmental effects of the proposed facility been avoided to the maximum extent possible?
2. Does a cost benefit analysis of the environmental-impact costs balanced against the social and economic benefits of the proposed facility demonstrate that the latter outweighs the former?
3. Are there alternative projects which would offer more protection to the environment than the proposed facility without unduly curtailing nonenvironmental benefits?
4. Are there alternative sites which would offer more protection to the environment than the proposed facility site without unduly curtailing nonenvironmental benefits?
5. Are there mitigating measures which would offer more protection to the environment than the facility as proposed without unduly curtailing nonenvironmental benefits?

According to the Louisiana Water Quality Regulations, LAC 33:IX.2503.B, the following requirements shall apply to the signatory page in this application:

Chapter 25. Permit Application and Special LPDES Program Requirements

2503. Signatories to permit applications and reports

- A. All permit applications shall be signed as follows:
 - 1. For a corporation - by a responsible corporate officer. For the purpose of this Section responsible corporate officer means:
 - (a) A president, secretary, treasurer, or vice-president of the corporation in charge of a principal business function, or any other person who performs similar policy- or decision-making functions for the corporation, or
 - (b) The manager of one or more manufacturing, production, or operating facilities employing more than 250 persons or having gross annual sales or expenditures exceeding \$25 million (in second-quarter 1980 dollars), if authority to sign documents has been assigned or delegated to the manager in accordance with corporate procedures.
 - 2. For a partnership or sole proprietorship - by a general partner or the proprietor, respectively; or
 - 3. For a municipality, parish, State, Federal or other public agency - either a principal executive officer or ranking elected official. For the purposes of this Section a principal executive officer of a Federal agency includes:
 - (a) The chief executive officer of the agency, or
 - (c) A senior executive officer having responsibility for the overall operations of a principal geographic unit of the agency (e.g., Regional Administrator of EPA).
- B. All reports required by permits, and other information requested by the state administrative authority shall be signed by a person described in LAC 33:IX.2503.A, or by a duly authorized representative of that person. A person is a duly authorized representative only if:
 - 1. The authorization is made in writing by a person described in LAC 33:IX.2503.A.
- 2. The authorization specifies either an individual or a position having responsibility for the overall operation of the regulated facility or activity, such as a position of plant manager, operator of a well or well field, superintendent, position of equivalent responsibility, or an individual or position having overall responsibility for environmental matters for the company. (A duly authorized representative may thus be either a named individual or any individual occupying a named position); and
 - 3. The written authorization is submitted to the state administrative authority.
- C. Changes to authorization. If an authorization under LAC 33:IX.2503.B is no longer accurate because a different individual or position has responsibility for the overall operation of the facility, a new authorization satisfying the requirements of LAC 33:IX.2503.B must be submitted to the state administrative authority prior to or together with any reports, information, or applications to be signed by an authorized representative.
- D. Any person signing any document under LAC 33:IX.2503.A or B shall make the following certification:

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment for knowing violations."

SIGNATORY AND AUTHORIZATION

Pursuant to the Water Quality Regulations (specifically LAC 33:IX.2503) promulgated September 1995, the state permit application must be signed by a responsible individual as described in LAC 33:IX.2503 and that person shall make the following certification:

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment for knowing violations."

The applicant for this permit hereby authorizes the Department of Environmental Quality to publish the public notice for a draft permit once in the appropriate newspaper(s). In accordance with LAC 33:IX.6521.A, the applicant agrees to be responsible for the cost of publication. The newspaper(s) is authorized to invoice the applicant directly.

Signature _____

Printed Name _____

Title _____

Date _____

Telephone _____

CHECKLIST

To prevent any unnecessary delay in the processing of your notice of intent to be covered under the general permit, please take a moment and check to be certain that the following items have been addressed and enclosed:

1. ALL questions and requested information have been answered (N/A if the question or information was not applicable).
2. ALL required maps, drawings, lab analysis, and other reports are enclosed.
3. The appropriate person has signed the signatory page.
4. Minor Facilities (flow less than 1.0 MGD), forward the original and two copies of this application. Major Facilities (flow 1.0 MGD and greater), forward the original and four copies of this application.

ANY APPLICATION THAT DOES NOT CONTAIN ALL OF THE REQUESTED INFORMATION WILL BE CONSIDERED INCOMPLETE. APPLICATION PROCESSING WILL NOT PROCEED UNTIL ALL REQUESTED INFORMATION HAS BEEN SUBMITTED.

NOTE: UPON RECEIPT AND SUBSEQUENT REVIEW OF THE APPLICATION BY THE PERMITS DIVISION, YOU MAY BE REQUESTED TO FURNISH ADDITIONAL INFORMATION IN ORDER TO COMPLETE THE PROCESSING OF THE PERMIT.